

ARO01

**APPLICATION FOR REGISTRATION OF PREMISES AS
 A PLACE FOR CONDUCTING AUCTIONS
 Greater London Council General Powers Act 1984**

(PLEASE COMPLETE THIS FORM IN BLOCK CAPITALS)

SECTION 1 - DETAILS OF PREMISES

Trade Name or Title of Premises
Full Address of Premises to be Registered
Postcode
Telephone Number
Email Address

SECTION 2 - DETAILS OF APPLICANT(S)

If application is made by or on behalf of a company, society, association or body, state:

Full Name of the Organisation
Registered Company Number (if applicable)
Full Address of Registered or Principal Office
Postcode
Telephone Number

Full name of Applicant(s) (If organisation, please enter details of company secretary, all directors, partners etc)

Full Names
Maiden or other Names (if applicable)
Date of Birth
Place of Birth (Town & Country)
Current Private Address
Postcode
Telephone Number
Email Address
NOTE: If you have lived at your current address for less than 5 years, please give details of your previous address as well Details of Previous Address
Postcode

SECTION 2 - DETAILS OF APPLICANT(S) (cont'd)

Full Names
Maiden or other Names (if applicable)
Date of Birth
Place of Birth (Town & Country)
Current Private Address
Postcode
Telephone Number
Email Address
NOTE: If you have lived at your current address for less than 5 years, please give details of your previous address as well Details of Previous Address
Postcode

Please use continuation sheet if necessary

SECTION 3 - DETAILS OF PREVIOUS APPROVALS HELD OR REFUSED

Please give details of any licence currently or previously held, or of any licence refused or revoked.

Name of Issuing Authority
Address of Issuing Authority
Date(s) Approval(s) Held
Reason for Revocation/Refusal (If Applicable)

SECTION 4 - GENERAL INFORMATION

What Type of goods are to be sold (e.g. antiques, electrical goods etc)
--

SECTION 4 - GENERAL INFORMATION (cont'd)

Proposed Maximum number of persons to be allowed on the premises at any one time	
Public	Staff
<input type="text"/>	<input type="text"/>

SECTION 5 - DECLARATION

I/We give consent for the details given on this form to be divulged to the Police and other outside agencies relevant to this application.

I/we enclose a sketch plan of the sales area, including dimensions.

I/We understand that details of this registration will be maintained on a Public Register.

I/We undertake to make payment upon receipt of an invoice from the London Borough of Redbridge (Payment MUST NOT be enclosed with this application).

I/We hereby declare that the particulars given above and in this application are true to the best of my/our belief.

Printed Name

Signature

Date

Contact details for this application (if different to the address of the premises)

Name
Address
Postcode
Telephone Number
Email Address

This form should be completed and returned, together with the sketch plan, to:

Licensing Service
10th Floor
Lynton House
255-259 High Road
Ilford Essex
IG1 1NN

Information provided in this application will be held on our computers and manual records. It will be used to assess your application and may be shared with other departments within the London Borough of Redbridge, The Metropolitan Police, The London Fire & Emergency Planning Authority, sub-contractors contracted to provide any support, administration or similar service and any other parties we are required to consult. It may be disclosed where required by law or in connection with legal or regulatory proceedings. Where the public are entitled to object to a licence or we are required to maintain a public register details of licences & applications may be published on the Council's website.